

Patricia Booker

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/583191

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		1		1		
4		1		1		
5	1		1			
6		1		1		
7		1		1		
8	1		1			
9		1		1		
10		2		2		
11		2		2		
12		2		2		
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44		2		2		
45		2		2		
46		2		2		
47		2		2		
48		2		2		
49	1					
50						
TOTAL IND.	7	↓	4	↓		↓
TOTAL DEP.	58	←	48	←		←
TOTAL CLAIMS	62		52			

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	1		1			
52		1		1		
53	1					
54		1		1		
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95						
96						
97						
98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						